



JUN 29 2004 3:19PM

AVENTIS US PAT DEPT

NO. 4727 P. 3/10

PTO/SB/22 (8-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		<b>Aventis Docket Number USAV2001/0079US NP</b>											
In re Application of <b>Stephen J. Minshull, et al</b>													
Application Number <b>10/665,873</b>		Filed	<b>September 18, 2003</b>										
For <b>Inhaler</b>													
Group Art Unit <b>3761</b>		Examiner	<b>To Be Assigned</b>										
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension fees are as follows (check time period desired):</p> <table><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td><u>\$ 110.00</u></td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td><u>\$ 420.00</u></td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td><u>\$ 950.00</u></td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td><u>\$ 1,480.00</u></td></tr><tr><td><input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td><u>\$ 2,010.00</u></td></tr></table> <p><input checked="" type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>18-1982</u>. I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> assignee of record of the entire interest. <input type="checkbox"/> applicant. <input checked="" type="checkbox"/> attorney or agent of record (Customer No. <u>005487</u>).</p> <p>Date _____ Signature _____ William C. Coppola, Reg. No. 41,686 Typed or Printed Name</p>				<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	<u>\$ 110.00</u>	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	<u>\$ 420.00</u>	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	<u>\$ 950.00</u>	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	<u>\$ 1,480.00</u>	<input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5))	<u>\$ 2,010.00</u>
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	<u>\$ 110.00</u>												
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	<u>\$ 420.00</u>												
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	<u>\$ 950.00</u>												
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	<u>\$ 1,480.00</u>												
<input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5))	<u>\$ 2,010.00</u>												

Burden Hour Statement. This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Alexandria, VA 22131.  
DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

07/02/2004 ZJUHA1 00000110 181982 10665873

01 FC:1255 2010.00 DA